

# Hazardous Materials Shipping Order

Shipper Name:

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Shipper Address:

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Phone:

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Consignee Name:

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Consignee Address:

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Phone:

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## Shipment Details

Date of Shipment:

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Courier Company:

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Special Instructions:

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## Hazardous Materials Information

UN/ID Number	Proper Shipping Name	Class/Division	Packing Group	Quantity	Type of Packaging

Description of Hazardous Material:

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Emergency Contact Name:

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Emergency Phone:

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Additional Notes:

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Shipper's Signature  
(Name & Date)

Carrier's Signature  
(Name & Date)